



PATENT
Docket No. 2026-4034

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Wyndham H. Wilson and Robert Wittes Group Art Unit : 1205
Serial No. : 07/950,380 Examiner : Jerome D. Goldberg
Filed : September 22, 1992
For : **TAXOL TREATMENT OF LYMPHOMAS AND BREAST CANCER**

Honorable Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. § 1.10 (a)

Express Mail Label No. : IB651117225US
Date of Deposit : November 8, 1993

I hereby certify that the following attached paper(s) and/or fee(s)

- 1.- Amendment under 37 C.F.R. § 1.116
- 2.- Amendment Fee Transmittal
- 3.- Petition for Extension of Time (two months)
- 4.- Extension of Time Fee (Charged to Deposit Acct.)
- 5.- Notice of Appeal
- 6.- Appeal Fee (Charged to Deposit Acct.)
- 7.- Return Receipt Postcard
- 8.- Express Mail Certificate

is (are) being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is (are) addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Francisco Garcia
(Typed or printed name of person mailing paper(s) or fee(s))

(Signature of person mailing paper(s) or fee(s))

Mailing Address:

MORGAN & FINNEGAN
345 Park Avenue
New York, New York 10154
(212) 758-4800 (Telephone)
(212) 751-6849 (Facsimile)

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AMENDMENT FEE TRANSMITTAL

HON. COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

☒ [X] No additional fee is required.☐ [] The additional fee has been calculated as shown below:CLAIMS AS AMENDED

| | Claims Remaining After Amendment | | Highest No. Covered by Previous Payments | | Present Extra | Rate | Additional Fee |
|-----------------------------------|---|---|---|---|------------------|-----------|-------------------|
| Total Claims* | 19 | - | 20 | = | 0 | x \$22.00 | \$ <u>0</u> |
| Independent Claims | 3 | - | 3 | = | 0 | x \$74.00 | \$ <u>0</u> |
| Multiple Dependent Claim(s) | (If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$230.00 to additional fee.) | | | | | | \$ <u>0</u> |
| | Total: | | | | | | \$ <u>0</u> |

- ☐ [] Verified Statement of "Small Entity" Status Under 37 CFR § 1.27
filed _____ Reduced Fees Under 37 CFR § 1.9(f)
(50% of total) paid herewith. \$ _____
- ☐ [] Charge fee to Deposit Account No. 13-4500. Order No. _____
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☒ [X] The Commissioner is hereby authorized to charge any additional fees which may be required for this
amendment, or credit any overpayment to Deposit Account No. 13-4500. Order No. 2026-4034.
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

Includes all independent and single dependent claims and all claims referred to in multiple
dependent claims. See 37 C.F.R. § 1.75(c).

- ☐ ____ Page(s) of substitute Sequence Listing
- ☐ ____ Computer disk(s) containing substitute Sequence Listing
- ☐ Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.
- ☐ A check in the amount of \$ _____ to cover the filing fee is attached.

Respectfully submitted,

MORGAN & FINNEGAN

Dated: November 8, 1993

By: Leslie A. Serunian

Leslie A. Serunian
Registration No. 35,353

Mailing Address:

MORGAN & FINNEGAN
345 Park Avenue
New York, New York 10154
(212) 758-4800
(212) 751-6849 Facsimile

FORMS: AMD-TRAN.NY
Rev. 1/1/93

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Transmitted herewith is an Amendment for the above-identified application.

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☐ The additional fee has been calculated as shown below:

CLAIMS AS AMENDED

| | Claims Remaining After Amendment | | Highest No. Covered by Previous Payments | | Present Extra | Rate | Additional Fee |
|-----------------------------------|---|---|---|---|------------------|-----------|-------------------|
| Total Claims* | 19 | - | 20 | = | 0 | x \$22.00 | \$ <u>0</u> |
| Independent Claims | 3 | - | 3 | = | 0 | x \$74.00 | \$ <u>0</u> |
| Multiple Dependent Claim(s) | (If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$230.00 to additional fee.) | | | | | | \$ <u>0</u> |
| | Total: | | | | | | \$ <u>0</u> |

- ☐ Verified Statement of "Small Entity" Status Under 37 CFR § 1.27
 filed _____ Reduced Fees Under 37 CFR § 1.9(f)
 (50% of total) paid herewith. \$ _____
- ☐ Charge fee to Deposit Account No. 13-4500. Order No. _____
 A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for this
 amendment, or credit any overpayment to Deposit Account No. 13-4500. Order No. 2026-4034.
 A DUPLICATE COPY OF THIS SHEET IS ATTACHED.

Includes all independent and single dependent claims and all claims referred to in multiple
 dependent claims. See 37 C.F.R. § 1.75(c).

5. Please abandon the parent application at a time while the parent application is pending or at a time when the petition for extension of time in that application is granted and while this application is pending and has been granted a filing date, so as to make this application co-pending with said parent application. Please use all the contents of the parent application file wrapper, including the drawings, as the basic papers for the new application.

It is understood that secrecy under 35 U.S.C. § 122 is hereby waived to the extent that if information or access is available to any one of the applications in the file wrapper of a 37 C.F.R. § 1.62 application, be it either this application or a prior application in the same file wrapper, the PTO may provide similar information or access to all the other applications in the same file wrapper.

6. ☒ The fees to be charged are to be based on the number of claims:
- a. ☒ remaining after entering the attached Amendment.
 - b. ☐ entered in the parent application as of the date of its abandonment.
 - c. ☐ remaining after entering the Amendment After Final Rejection filed _____ in the above-identified parent application.

CLAIMS FOR FEE CALCULATION

| | Number | | Number Extra | Rate for Non-Small Entity | Basic Fee \$710.00 |
|------------------------------------|-------------------|-----|-----------------|------------------------------|-----------------------|
| Total* Claims | 19 | -20 | 0 | x \$22.00 | \$ 0 |
| Independent Claims | 3 | -3 | 0 | x \$74.00 | \$ 0 |
| Multiple Dependent Claims(s) | [] yes Add'l Fee | | | \$230.00 | |
| | [] no None | | | - - - | \$ 0 |

Filing Fee Calculation \$710.00

7. ☐ A verified statement that this is a filing by a small entity is attached or has been filed in the above-identified parent application and its benefit under 37 C.F.R. § 1.28(a) is hereby claimed. Reduced fees under 37 C.F.R. § 1.9 (f) (50% of total) paid herewith \$_____.
8. ☒ A check in the amount of \$710.00 in payment of the FWC application filing fees is attached.
9. ☐ Charge fee to Deposit Account No. 13-4500. Order No. _____. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
10. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for filing this application, or credit any overpayment to Deposit Account No. 13-4500. Order No. 2026-4034US1. A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
11. ☐ Priority of application Serial No. _____, filed on _____, in _____, is claimed under 35 U.S.C. § 119. (country)

Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).